BEST AVAILABLE COPY

pplication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

	·											
CLAIMS AS FILED - PART I (Column 1) (Column 1)						mn 2)	SMA TYP	LL E	NTITY	OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS							R	ATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	355.00	OR	BASIC FEE	· 710.00
TOTAL CHARGEABLE CLAIMS			(⁽) minus 20=		• Ø		X	\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			∑ min	us 3 =	* ®		X	40=		ÖR	X80=	
MU	LTIPLE DEPENI	DENT CLAIM PI	RESENT				35=		OR	+270=	·	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	L	OTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II										On	OTHER	THAN
		(Column 1)		(Column 2) (Column 3)				SMALL ENTITY			SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X	X\$ 9=		OR	X\$18=	ş
	Independent	*	Minus	***		=	X	40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		+1	35=		OR	+270=	
										OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)									L		ADDIT. FEE	
		(Column 1) CLAIMS	17.15.25.8		HEST	(Column 3)	_		LADDI	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER TOUSLY D FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
	Total	. 18	Minus	** =	20	= -	×	\$ 9=		OR	X\$1.8=	
	Independent	· 3	Minus	***	8	=	×	40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	II CLAIM		+	135=		OR	+270=	
								TOTAL		OR	TOTAL	
					. (0.1		IT. FEE		T ~. ,	ADDIT. FEE	·	
		(Column 1) CLAIMS			umn 2) HEST	(Column 3)				1		
AMENDMENT C		REMAINING AFTER AMENDMENT		NU! PREV	MBER /IOUSLY D FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE	~	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=	
	Independent	•	Minus	***]=	>	40=		OR	X80=	
Ľ	FIRST PRESE	ULTIPLE DEPENDEN		T CLAIM			135=		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL		-	TOTAL	
••	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								L	JOR	ADDIT. FEE	<u> </u>
	The "Highest Nur	mber Previously P	aid For" (Total o	r Indeper	ndent) is th	ne highest number	er found	in the a	ppropriate bo	ox in c	olumn 1.	-